

# Double Trouble in Recovery



BASIC GUIDE

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Hazelden®

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## Preface

Double Trouble in Recovery (DTR) is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problems and help others recover from their particular addictions and manage their mental disorders. DTR is designed to meet the needs of people who, in addition to having a substance abuse problem, have also been diagnosed with a mental disorder (this is often called a “dual diagnosis”). For many of us, having addiction and mental disorders represents “double trouble in recovery”—trouble that is often further complicated by the problems and benefits of psychiatric medications.

Adapted from the Twelve Step program of Alcoholics Anonymous, the DTR fellowship is founded upon equality, one dually diagnosed person sharing and talking with, and never down to, another. Like AA and other such groups, the DTR program is built around regular meetings, a sponsorship system, and mutual support in “working the Steps” and adhering to the program’s “Traditions.” The only requirement for membership is a desire to stop drinking

and drugging and to work on one's mental health. Members pay no dues or fees; we are self-supporting through our own contributions.

Many of us with substance abuse problems and mental disorders have followed the Steps and Traditions of other mutual support programs that address either alcoholism or drug addiction. We needed a program that addressed both substance addictions *and* mental disorders. Established in 1989, DTR has now grown to the point where we can set down on paper our own Steps and Traditions. This book, written in the collective voice of those in DTR, is the result.



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## Introduction

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Do you have double trouble? If you are dually diagnosed with a mental disorder as well as a substance use problem, this book is for you. It can help you along the Twelve Step path to recovery, to a new life. This guide is meant to serve as a basic text for the Double Trouble in Recovery fellowship, just as the “Big Book,” officially titled *Alcoholics Anonymous*, is the basic text of AA.

In fact, the Big Book is so useful that this guide comments on it and quotes from it often. You’ll also see references to another book, *Twelve Steps and Twelve Traditions*. This guide can be read with or without those books at hand, and with or without belonging to a DTR group, although joining one is highly recommended.

While the Big Book focuses on alcoholism, its principles apply to any kind of substance dependence. You don’t have to be an alcoholic to use the practical wisdom in the Big Book. Give it a chance, and give yourself a chance. As you read this *Double Trouble in Recovery Basic Guide*, it will become clear that the struggles we face—with drugs, alcohol, or



both—are similar to those described in the Big Book. And, while our struggles with mental disorders are somewhat different, the solution and the Twelve Step program of action are the same.

We thank the AA program and its founders as we follow in their footsteps. We also thank all the DTR members who collaborated on this book. We are not experts, but individuals who have learned a few things in our recoveries and have a desire to share them with other dually diagnosed individuals. “You have to give it away to keep it,” as the program wisdom has it. We are in recovery from mental disorders and substance abuse, and we know how hard it is to apply the Twelve Steps to our lives. This book brings together a collection of our experiences with dual diagnosis and with recovery using the Twelve Step program as detailed in the Big Book. This is not a philosophy; this is a living program, to be believed and lived to the best of our abilities. We share what we know and we strive toward progress, not perfection. We don’t speak officially for DTR or for any other Twelve Step program as a whole. Feel free to argue or to disagree with anything you read in this commentary; no matter what, don’t let it turn you away from the program.

In writing this commentary, we hope to help our brothers and sisters—and ourselves—attain happiness and freedom from our addictions and from mental disorders. It’s a great honor to share what we know about dual diagnosis and how the Twelve Steps of DTR apply to our path of recovery. We

have striven to keep open minds and to honestly expose our problems and weaknesses. But the humility we show shall never mask the courage it takes to admit who and what we are, as together we find the hope and strength that gradually broadens our narrow path into a wide road leading to peace, serenity, and a meaningful life.

Our fellowship is about one dually diagnosed human being helping another. It's true that those of us in recovery are sometimes closed-minded, and thus we sometimes find following our spiritual teaching difficult, for none of us really wants to find out too much about ourselves. But we have nonetheless seen tolerance expressed to us in a variety of ways in DTR: in kindness and consideration toward the newcomer just starting on the path of recovery; in understanding those who perhaps have been less fortunate; and in empathy toward those whose ideas may seem to differ greatly from our own. These spiritual principles are crucial. Without them, we doubt that the type of giving we offer each other could keep anybody clean, sober, and out of the hospital. With them, we can talk about our problems and suggest a solution and a practical program of action. In this book we explain how this program emerges from our experiences, our truth. Together, by sharing these experiences, we can learn to help each other.

Few of us come to the Double Trouble in Recovery program beaming with hope, faith, and understanding. If you are reading this book, you might doubt that the DTR

program can work for you. Many of us had such doubts. We urge you to read on a little further, however, because you may find that we are telling your story as well as our own. Maybe you, too, can have a new experience by following this program. DTR is a practical program that we “work” in our daily lives by taking specific actions.

As dually diagnosed people, we can use the Twelve Steps to address not only our substance dependence but our mental disorders as well. This book addresses not only substance issues but also the stigma of mental illness and the challenge of managing a mental disorder. We search for a spiritual solution for our troubles, for acceptance of our mental disorder without the stigma, and for identification with our fellows.

If you can find (or start) a DTR group in your area, you can meet regularly with other dually diagnosed people: people who may have much in common with you, people who can share support, ideas, and fellowship. Like other Twelve Step meetings, these generally are held at least weekly. They offer mutual support, sharing of experiences, and a sponsorship system that partners newcomers with others further along the recovery path. Check the Web site [www.doubletroubleinrecovery.org](http://www.doubletroubleinrecovery.org) for more information.

We recommend attending other Twelve Step meetings as well: Alcoholics Anonymous, Narcotics Anonymous, Dual Recovery Anonymous, and many other groups have developed a nationwide meeting network for those with

substance use problems. Check the Internet or your local telephone directory.

As dually diagnosed people, we suffer physically, emotionally, mentally, and spiritually. We have physical cravings and mental obsessions and find ourselves powerless over them. Those of us in the DTR fellowship found that we needed to have a vital spiritual experience to recover. By understanding the problem, seeing the solution, and applying the program of action, we hope you will have the vital experience necessary to start you on the path to recovery. We hope you will decide to join us. All that's needed is a beginning. In the words of the Big Book (page 568), "Willingness, honesty and open mindedness are the essentials of recovery. But these are indispensable."

While we refer often to the Big Book, remember, this guide can be used alone. It has been organized to include everything you need to get started and to work on our program of recovery. In the chapters that follow, you can read in detail about Steps One through Twelve. These chapters may be read alone, with a sponsor, or aloud during a meeting. Each chapter ends with relevant quotes from the Big Book or *Twelve Steps and Twelve Traditions* (also known as the "Twelve and Twelve") and a short list of questions to help you get the most out of each Step. The book also includes a description of each of the Twelve Traditions: tried-and-true principles that help recovery groups function at their best.

As with all textbooks, this one should be read in order, from beginning to end, as each section builds on the last. Used in that way, this guide gives us a set of tools to use in our recovery process. Before you start doing the work suggested in this text, you may find it helpful to read it all the way through once, especially if you are new to the process of Twelve Step recovery.

This book is written in the spirit of AA's Twelve Steps, to carry a message to members of DTR and those who might join us. Many of us walked into our program not believing in anything. Without faith or hope we entered a DTR meeting room with closed minds, with little understanding of ourselves. But something drove us there—we were ready to face the fact that conducting our lives by self-will is what got us into trouble. You will learn that a life run on self-will cannot be a healthy life. You will learn to open yourself to a new experience, to put aside old ideas as we submit together to the Steps of recovery. This isn't always a comfortable process. But we need to have a new experience, because our old way of thinking is a liability and not an asset. This work is about sharing our lives. This guide is a tool to do that work. It will help us develop a living program and trust in a Higher Power. It will help us have a new experience with this power and will show us how to relate to our fellows. (*Note: Many of us call this power "God." Although we use the word *He* in this book to refer to this "God of our understanding," we don't exclude anyone's conception of a Higher Power.*)

This work is about treating a spiritual malady and learning to make progress, to be less alone, less afraid, and less empty, and to welcome positive change in our lives.

This book carries the message that we can recover from the seemingly hopeless state of mind, body, and spirit, and it shows how some of us have recovered. We are sharing not so much our knowledge but our experience with a way of living and its results. As the basic text of *Double Trouble in Recovery*, this book suggests a planned program of action to recover from our addictions and manage our mental disorders. We will learn to help each other recover from dual diagnosis, to stay spiritually fit one day at a time, and to share these tools with others. But just joining the fellowship, going to meetings, is not enough. We must carry the message to others and practice the principles of the program. We can all have a new experience and, in doing the work suggested here, recover from our spiritual malady—body, mind, and spirit.

We hope to meet you along the path.



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## The Twelve Steps of Double Trouble in Recovery

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1. We admitted we were powerless over our mental disorders and substance abuse—that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God *as we understood Him*.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.

9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these Steps, we tried to carry this message to other dually diagnosed people, and to practice these principles in all our affairs.

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*The Twelve Steps are adapted with permission of Alcoholics Anonymous World Services, Inc. Permission to reprint and adapt the Twelve Steps does not mean that AA is in any way affiliated with this program. AA is a program of recovery from alcoholism—use of the Twelve Steps in connection with programs and activities that are patterned after AA but address other problems does not imply otherwise.*



## **The Twelve Principles of Double Trouble in Recovery**

As you “work the Steps” of recovery, you’ll see that each one is rooted in a principle, a guiding theme. Keep them in mind as you read. These are the building blocks of a healthy life.

- Step 1 ..... Honesty
- Step 2 ..... Hope
- Step 3 ..... Faith
- Step 4 ..... Courage
- Step 5 ..... Trust, Integrity
- Step 6 ..... Willingness
- Step 7 ..... Humility
- Step 8 ..... Forgiveness, Brotherly Love
- Step 9 ..... Restitution, Justice
- Step 10 ..... Perseverance
- Step 11 ..... Spirituality, Awareness
- Step 12 ..... Service



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## Step One

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*We admitted we were powerless over our mental disorders and substance abuse—that our lives had become unmanageable.*

We are powerless over our mental disorders. We are powerless over our addictions. Before we admitted these truths, our lives were unmanageable. We were unable to handle life without drugs and alcohol or to take care of our mental health. We thought that drugs and alcohol would make us feel better. They did, at first. But those substances became our masters, and we lost control. Today, we truly accept the fact that we are addicts and alcoholics with a mental disorder. We accept both diagnoses. When it comes to our dual diagnosis, we are powerless.

Honesty with ourselves is central to Step One. As we review our past, we see that we cheated, stole, lied, and manipulated; we were dishonest, self-centered, self-seeking, inconsiderate, and frightened. We lived in opposition to truth and honesty, and we got caught. We suffered from

drugs and alcohol. We tortured ourselves with barbiturates, cocaine, heroin, LSD, ice, crack, pills, and other mood-altering chemicals. We discovered that our bodies—our physical cravings—were as abnormal as our minds—our mental obsessions. Knowing we were out of control and could not tolerate drugs and alcohol didn't help. They were not our substances of "choice" but of "no-choice." We were sick, in full flight from reality, suffering mentally, physically, and spiritually.

For those of us in Double Trouble, it is rare that our alcoholism or other addiction can be permanently cured by any treatment. But although it may be incurable, it is treatable. How? Through absolute abstinence from our "substance of no-choice." The stakes could not be higher. Our addiction cost us almost everything worthwhile in life. We lived without hope. We hated ourselves and our own diagnosis. We decided our situation was hopeless. We often used drugs or alcohol to mask our mental and emotional symptoms. Some of us were lonely, without family or friends, and with no one wanting to know us. People turned away from us. Our drinking or drugging was no longer a comfort or a luxury. It was a necessity become a routine. We told ourselves that one day we would quit—but always tomorrow, not today. And tomorrow didn't come right away. In fact, it didn't come for years.

Drinking and drugging frequently made our mental disorder symptoms worse. No words can describe the torture

we felt, shuttling in and out of hospitals and institutions, sometimes homeless, overcome with despair and self-pity. Drugs, alcohol, and our symptoms were our masters. Only when hospitalized did we stop using—until we were released to the streets to start in again. We were so powerless, but we somehow still thought we were powerful. In the First Step of our recovery, we must admit defeat. Until we can do that, our lives will remain unmanageable.

Let's look more closely at our first diagnosis: addiction. At some stage of our drinking or drugging career we reached a point where, as soon as we started, we would lose control over the amount we would use. Craving became sufficient reason in and of itself to keep using. We were both physically and mentally impaired. Some of us could drink and stop but not drug and stop, or vice versa. The issue is control: Have we lost control? Are we powerless over our substance use? (See "On substance dependence" at the end of this chapter.) The disease of addiction is not something we make up our own minds about. We drank and drugged no matter what, not because we could stop when we wanted to, but because we couldn't stop. That aspect of our experience reveals a key truth. As you consider the First Step, ask yourself this question: once you put alcohol or drugs in your system, does it seem virtually impossible for you to stop? Accepting that fact is key: once the substance is in our system, we lose control and can't stop.

Again, as addicts and alcoholics, we are sick in body and in mind. Craving and compulsion control our bodies; addiction controls our minds. The tricks it plays on the mind include denial, rationalization, and other mental defense mechanisms. Remember: addiction is a disease that tells us that we don't have it. And even if we admit our problem after years of denial, we may find ourselves unable to stop.

The process of addiction may be a gradual one. Over time, we find that we've built a tolerance to the addictive substance: we need more of it to get the same effect. Not only that, we've become dependent on it. Before we knew it, we needed a drink to socialize or a joint to relax. So we tried not to use. We tried the geographical cure, physically moving away from our problems. We stayed away from the people, places, and things that we associated with our out-of-control behavior. But our minds continued to play tricks on us. They told us that free of outside influences, we could now control our drinking or drugging. We could use just one time. This is the obsession of the mind. We trusted our mind, and we used. Then our bodies reacted to the alcohol or the drug, and, having started, we couldn't stop. We became symptomatic and ended up in the hospital. This is how the vicious cycle of using begins again and again, and we can't stop it, even if we tell ourselves to stop. We are caught in the cycle of addiction, and we have no freedom. Our actions prove our addiction by how we live to use and use to live. Our obsessive thinking about using every day, day in and

day out, is equaled only by our physical cravings. We come to DTR because we realize that our own power alone can't help us do what has to be done to save our lives. Insight and self-understanding—knowing we have a problem—is valuable, but it's not enough.

Now let's look at the second part of our dual diagnosis. We ask ourselves, is our struggle with addiction compounded by a mental disorder? And how do we know if we have a mental disorder? One way is to be professionally diagnosed with schizophrenia, bipolar disorder, major depression, or any diagnosis describing psychotic thinking. Another way we may find that we have a mental disorder is by assessing our daily lives. Does our way of thinking or feeling get us into so much trouble that sometimes we can't live even a minimally satisfying life? Do our minds or emotions interfere with our daily functioning to such an extent that we can't make it through the day without major difficulties, even if we are clean and sober? If the answer is yes, then it's likely that we have a mental disorder. Perhaps at first we are unsure. If you're uncertain, pay extra attention to your gut. In your gut, not in your head, ask yourself for a conscious awareness of whether both of these diagnoses apply to you. Let *your* experience show you your truth. Don't go by anyone else's experience. Ask yourself: once I stop using, can I keep myself stopped? For most of us, the answer will be no. We ask ourselves these questions so that we might find our own truth.

Especially with regard to mental health, it's wise to seek a professional opinion. But we must fully "own" our diagnosis ourselves. If you're told you have a mental disorder, take it seriously. Does it match with your own experience? Define yourself by your own experience. Find out your own truth. The mind will lie—about its own health, and about its addictions. But your experience will not lie to you if you let it speak for itself. Let no one tell you whether or not you are a drug addict or an alcoholic or both. Listen, then search your own life for the evidence. Make it your own opinion. Listen to your experience and ask yourself: Am I physically powerless over alcohol and drugs? Do I have a mental disorder?

We become honest by discovering our own truth. Understanding comes, but only slowly, through awareness and acceptance of conditions *as they are*. We know we have problems, but the truth is hard to accept. In order to recover, however, the truth *must* be accepted. We come to know this as a fact in our recovery. Admitting powerlessness is not a sign of weakness. It simply means that when it comes to substance use and to struggling with mental disorders, we are not in charge. Willpower has no meaning when it comes to controlling our use of drugs and alcohol and our mental processes. Before we took the First Step, we had a distorted view of ourselves and of our lives, of what was real and what was not. The First Step can set us free. Not just reading or reciting it, but living it through experience. Our whole recovery rests on the First Step premise.

We shall continually return to this principle: Honesty sets you free. Once we accept our powerlessness, many of us experience the miracle of being freed from active addiction and from the obsession to use again. This is the paradox of recovery: that in accepting our powerlessness, we become empowered to stop using and to work on our mental disorders. This comes as a great relief. With recognition and acceptance, we are free. We never need to go back to drugs and alcohol again. Instead of being filled with our addictive thoughts of self-destruction, remorse, despair, rage, and sadness about our past, we look with great joy and comfort at these precious moments we are now given. Admitting complete defeat is not what we wanted, but it is what we needed. One part of us sincerely wanted to be free. Another part continued to want to drink and drug. We came to know that our addiction was greater than our will. It was a monster with an insatiable appetite, and we let it take from us all our self-sufficiency and our will to resist its demands.

If you still think you can handle that monster, try this simple test: Go ahead and stop, and stay stopped. Do without. If you are successful, there is no addiction. But if you cannot stop and stay stopped, no amount of willpower or denial will change the fact that you are addicted. In regard to whether you have a mental disorder, try this: If you are manic, slow down. If you hear voices, stop them. If you are depressed, feel better. If you cannot, you have a mental disorder.



This program won't be easy at first. When our bodies are deprived of something they have been accustomed to, they respond with danger signals: uneasiness, irritability, extreme agitation or panic, rapid pulse, tremors. We become more aware of our mental health symptoms or our disease. Our bodies and our minds are telling us something is wrong. And now we know that something is wrong indeed. We are powerless over our addiction and mental disorders. Our lives have become unmanageable.

Having admitted this and having faced, perhaps for the first time, the mess our lives have become due to this spiritual malady, we come to see that if powerlessness is our problem, empowerment is the solution.

### **Relevant Quotes for Step One**

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**On acceptance:** In part 2 of the Big Book, AA members recount their own recovery experiences. In story 16, "Acceptance Was the Answer," the author writes, "Acceptance is the answer to *all* my problems today. When I am disturbed, it is because I find some person, place, thing, or situation—some fact of my life—unacceptable to me, and I can find no serenity until I accept that person, place, thing, or situation as being exactly the way it is supposed to be at this moment. Nothing, absolutely nothing happens in God's world by mistake. Until I accepted my alcoholism I couldn't stay sober; unless I accept life completely on life's terms, I cannot be

happy. I need to concentrate not so much on what needs to be changed in the world, as on what needs to be changed in me and in my attitudes.

“Shakespeare said, ‘All the world’s a stage, and all the men and women merely players.’ He forgot to mention that I was the chief critic. I was always able to see the flaw in every person, every situation. And I was always glad to point it out, because I knew you wanted perfection, just as I did. AA and acceptance have taught me that there is a bit of good in the worst of us and a bit of bad in the best of us; that we are all children of God and we each have a right to be here. When I complain about me or about you I am complaining about God’s handiwork. I am saying that I know better than God.” (Big Book, p. 417)

**On powerlessness:** In this absurd yet apt analogy, a compulsive jaywalker illustrates our own mental obsessions and our powerlessness in the face of drugs or alcohol: “He tries every known means to get the jaywalking idea out of his head. He shuts himself up in an asylum, hoping to mend his ways. But the day he comes out he races in front of a fire engine, which breaks his back. Such a man would be crazy, wouldn’t he?” (Big Book, p. 38)

“Once more: The alcoholic at certain times has no effective mental defense against the first drink. Except in a few rare cases, neither he nor any other human being can provide such a defense. His defense must come from a Higher Power.” (Big Book, p. 43)

**On substance dependence:** In the Big Book chapter titled “The Doctor’s Opinion,” William D. Silkworth, M.D., writes, “I do not hold with those who believe that alcoholism is entirely a problem of mental control . . . These men were not drinking to escape; they were drinking to overcome a craving beyond their mental control . . . They are over-remorseful and make many resolutions, but never a decision . . . There is the type who always believes that after being entirely free from alcohol for a period of time he can take a drink without danger . . . They cannot start drinking without developing the phenomena of craving . . . The only relief we have to suggest is entire abstinence.” (Big Book, pp. xxix–xxx)

In chapter 4, the authors note, “If, when you honestly want to, you find you cannot quit entirely, or if when drinking, you have little control over the amount you take, you are probably alcoholic. If that be the case, you may be suffering from an illness which only a spiritual experience will conquer.” (Big Book, p. 44)

### **Suggested Questions for Step One**

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1. In what ways are you powerless over drugs or alcohol?
2. In what ways are you struggling with having a mental disorder?

3. How has your life been unmanageable as a result of using drugs or alcohol?
4. How has your life been unmanageable as a result of struggling with a mental disorder?



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## Step Two

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*Came to believe that a Power greater than ourselves  
could restore us to sanity.*

The end of drug and alcohol use is actually just the beginning. In Step One we prepare ourselves for the adventure of a new life by becoming honest and willing. In Step Two, we open our minds and our hearts and begin to believe in and find hope in a Power greater than our own. Nothing more is required of us. The willingness to believe is the starting point. There is no demand that you believe, and you don't have to take on all of Step Two right now. Step Two opens a door; it says that we "came to believe," not that we "came in believing." For most of us, belief and faith come gradually, as we start practicing the program and see it work for others like us. Easy does it.

The Steps are made to be used, not just discussed. We could sit and talk about hope, faith, courage and surrender, acceptance, honesty, humility, and gratitude—all of which are threads of the spiritual principles interwoven throughout

ensures that everyone has a chance to talk, and that the meeting ends on time.

- After a member shares his or her feelings, there is no cross-talk or lecturing of the person who has spoken. Members are asked to talk only about their own experiences as they relate to the topic of the meeting.
- If the group needs to take up a collection to pay small expenses associated with running the group, members will “pass a basket” to collect donations.

### Guest Speaker

At some meetings, the leader sets aside fifteen to twenty minutes for a speaker to share his or her experiences in dealing with dual diagnosis.

### Sharing

If time permits, group members are invited to speak briefly about their experiences. Again, sharing is voluntary, and some people may choose to “pass.”

### Closing

To end the meeting, group members often recite the Serenity Prayer as a group. Sometimes another moment of silence is observed.

## Meeting Script

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Following is a “script” (based on the above guidelines) for DTR meeting leaders to use. It is written for a speaker meeting but can be adapted for any other meeting format.

*Hi, my name is (leader’s first name), and I am dually diagnosed. I’d like to welcome everyone to this meeting of Double Trouble in Recovery. We meet here (give the scheduled day and time).*

*Please help me open this meeting with a moment of silence for those still sick and suffering dually diagnosed persons in and out of the room, followed by the Serenity Prayer for those who care to join me. (The group recites the Serenity Prayer.)*

*I’ve asked (first name) to read the DTR Preamble. (Reading follows.)*

*I’ve asked (first name) to read “How It Works” and the Twelve Steps of DTR. (Reading follows.)*

*I’ve asked (first name) to read “The Promises.” (Reading follows.)*

*I’ve asked (first name) to read “On Recovery.” (Reading follows.)*

*I'd like to thank my readers.*

*Now I'd like to extend a warm welcome to any newcomers and anyone who's just coming back. Just sit, relax, and listen. Is this anyone's first meeting, or are there any newcomers? Would anyone like to introduce themselves? (Introductions follow.)*

*This is an anonymous program, which means that who you see here and what you hear here stays here in this room. This is so we all feel comfortable with what we say.*

*Our speaker (first name) is here to share (his/her) experience, strength, and hope. When the speaker speaks, we suggest that you do not compare stories, but identify with the feelings. We all took different routes to get here, but the feelings are the same. (Speaker follows.)*

*We will now open the meeting for sharing. We ask that you limit your sharing to five minutes to give everyone who wishes a chance to speak. (Sharing follows.)*

*Anonymity is the spiritual foundation of all traditions, ever reminding us to put principles before personalities. This means that who you see, what you hear—please leave it here when you leave.*

*We have a nice way of closing. Please join together in reciting the Serenity Prayer. (Recitation of the Serenity Prayer follows.)*





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## Appendix B: Readings for DTR Meetings

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### **The Serenity Prayer**

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God, grant me the serenity to accept the things  
I cannot change,  
courage to change the things I can,  
and wisdom to know the difference.

### **DTR Preamble**

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Double Trouble in Recovery is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problems and help others to recover from their particular addiction(s) and mental disorders.

Double Trouble in Recovery is designed to meet the needs of the dually diagnosed and is clearly for those having addictive substance problems as well as having been diagnosed with a mental disorder.

We also address the problems and benefits associated with psychiatric medication as well as other issues crucial to mental health; thus we recognize that for many, having addiction and mental disorders represents *Double Trouble in Recovery*.

There are no dues or fees for DTR membership; we are self-supporting through our own contributions.

Double Trouble in Recovery is not affiliated with any sect, denomination, political group, organization, or institution.

Our primary purpose is to maintain freedom from our addiction(s) and to maintain our well-being.

## **How It Works**

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We band together to help ourselves recover from our addictions and mental disorders. We share our experiences in order to help ourselves to become honest, open-minded, and willing. Sharing helps all of us to remember how it was and how we arrived at where we are today.

We live *one day at a time* and practice the Twelve Steps of DTR.

## **The Twelve Steps of Double Trouble in Recovery**

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1. We admitted we were powerless over our mental disorders and substance abuse—that our lives had become unmanageable.

2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God *as we understood Him*.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked Him to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God *as we understood Him*, praying only for knowledge of His will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these Steps, we tried to carry this message to other dually diagnosed people, and to practice these principles in all our affairs.

## The Promises

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If we are painstaking about this phase of our development, we will be amazed before we are halfway through. We are going to know a new freedom and a new happiness. We will not regret the past or wish to shut the door on it.

We will comprehend the word *serenity*, and we will know peace. No matter how far down the scale we have gone, we will see how our experiences can benefit others. The feeling of uselessness and self-pity will disappear.

We will gain interest in our fellows. Self-seeking will slip away. Our whole attitude and outlook on life will change. Fear of people and of economic insecurity will leave us. We will intuitively know how to handle situations which used to baffle us. We will suddenly realize that our Higher Power is doing for us what we could not do for ourselves.

(Adapted from *Alcoholics Anonymous*, 4th ed., pp. 83–84)

## On Recovery

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We who are dually diagnosed are compelled to walk a long and narrow path. When we go out of control with our substances of choice, we become lost. If we ignore our doctors and our therapists, and misuse our medications, our path becomes very dark indeed.

In our fellowship, we band together for common good and recovery. With open-minded understanding for each other, we honestly expose our problems and our weaknesses.

The humility we show shall never mask or cover the courage it takes to admit who and what we are as, together, we find the hope and strength that make our narrow path into a wide road that leads to peace, serenity, and a meaningful life.

Therefore, working the Twelve Steps of DTR and regular attendance at DTR and other appropriate self-help groups will help us gain the rewards of sanity, serenity, and freedom from addictions.

DTR invites you to join us and continue or begin your mental, physical, and spiritual recovery.



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## Appendix C: Peer Support Group Resources

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**Alcoholics Anonymous:** [www.aa.org](http://www.aa.org)

**Double Trouble in Recovery:** [www.doubletroubleinrecovery.org](http://www.doubletroubleinrecovery.org)

**Dual Diagnosis Anonymous:** [www.ddaoforegon.com](http://www.ddaoforegon.com)

**Dual Recovery Anonymous:** [www.draonline.org](http://www.draonline.org)

**Emotions Anonymous:** [www.emotionsanonymous.org](http://www.emotionsanonymous.org)

**Narcotics Anonymous:** [www.na.org](http://www.na.org)

Check your local phone book or look online for meetings in your area. For additional information on DTR, please visit [www.hazelden.org/dtr](http://www.hazelden.org/dtr).

**Hazelden**, a national nonprofit organization founded in 1949, helps people reclaim their lives from the disease of addiction. Built on decades of knowledge and experience, Hazelden offers a comprehensive approach to addiction that addresses the full range of patient, family, and professional needs, including treatment and continuing care for youth and adults, research, higher learning, public education and advocacy, and publishing.

A life of recovery is lived “one day at a time.” Hazelden publications, both educational and inspirational, support and strengthen lifelong recovery. In 1954, Hazelden published *Twenty-Four Hours a Day*, the first daily meditation book for recovering alcoholics, and Hazelden continues to publish works to inspire and guide individuals in treatment and recovery, and their loved ones. Professionals who work to prevent and treat addiction also turn to Hazelden for evidence-based curricula, informational materials, and videos for use in schools, treatment programs, and correctional programs.

Through published works, Hazelden extends the reach of hope, encouragement, help, and support to individuals, families, and communities affected by addiction and related issues.

For questions about Hazelden publications,  
please call **800-328-9000**  
or visit us online at **[hazelden.org/bookstore](http://hazelden.org/bookstore)**.

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